03/17/2009 12:24 FAX 443 436 1256

CTR. LANGUAGE & SPEECH

2004/008

Supplemental Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Subject Matter::

Suggested Group Art Unit:: CD-ROM or CD-R?:: Sequence submission?::

Computer Readable Form (CRF)?::

Title::

Attorney Docket Number::

Request for Early Publication?:: Request for Non-Publication?::

Small Entity?:: Petition included?::

Secrecy Order in Parent Appl.?::

09/699,098

10/27/00 Regular

Utility 2165

None None

SECURE DATA INTERCHANGE

P0B13.70016US02

No Nο Yes

No No

Applicant Information

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name:: Middle Name:: Family Name::

City of Residence::

State or Province of Residence:: Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address:: Postal or Zip Code of mailing address::

Applicant Authority Type:: Primary Citizenship Country::

Status::

Given Name:: Middle Name:: Family Name::

City of Residence::

State or Province of Residence::

Country of Residence:: Street of mailing address::

City of mailing address::

Inventor US

Full Capacity Frederick S.M.

Herz Warrington

PA US Box 625

Canaan Valley

Davis wv

26260

inventor US

Full Capacity Walter

Paul Labys

Salt Lake City UT

US

965 Fairview Avenue

Salt Lake City

Page # 1

Supplemental 09689088 10/27/00 01/09/08

CTR. LANGUAGE & SPEECH

2005/008

State or Province of mailing address:: UT

84105-1703 Postal or Zip Code of mailing address::

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name:: Middle Name:: Family Name::

City of Residence:: State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address:: Postal or Zip Code of malling address::

Applicant Authority Type:: Primary Citizenship Country:

Status:: Given Name::

Family Name:: City of Residence::

State or Province of Residence:: Country of Residence::

Street of mailing address::

City of mailing address:: State or Province of mailing address:: Postal or Zip Code of mailing address::

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name:: Middle Name:: Family Name::

City of Residence::

State or Province of Residence::

Country of Residence:: Street of mailing address:: City of mailing address::

State or Province of mailing address:: Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number::

23628 Page # 2

Supplemental 09698068 10/27/00 01/09/08

inventor United Kingdom **Full Capacity**

David C.

PA

[[Parks]] <u>Parkes</u> Philadelphia

US 1122 Spruce Street

Apartment 3D Philadelphia

PA 19107

Inventor

US Full Capacity Sampath

Kannan Phlladelphia PA

US

1107 Spruce Street Philadelphia

PA

19107 Inventor

US

Full Capacity Jason

M. Elsner

PA

19107

Philadelphia Baltimure MD P4

1015 Spruce Street 4421 No runod Road **Philadelphia**

Baltimore MD

03/17/2009 12:25 FAX 443 436 1256 CTR. LANGUAGE & SPEECH

☑008/008

Representative Information

Representative Customer Number::

23628

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application cialming the benefit under 35 USC 119(e)	60/161640	10/27/99
This Application	An application claiming the benefit under 35 USC 119(e)	60/206538	05/23/00

Foreign Priority Information

Assignee Information